FORM D

PROCESSED
DEC 28 2007

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL	-
OMB Number: 323	5-0076
Expires: November 30	0, 2001
Estimated average but	rden
hours per response	. 16.00

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SE	USE ONLY
Prefix	Serial
DA	E RECEIVED

	s is an amendment and name has changed, and in	dicate change.)
Hestronix Common	Stock E Round	
Filing Under (Check box(es) that ap	ply): Rule 504 Rule 505 Rule 506	Section 4(6) GOLOE
Type of Filing: X New Filing	Amendment	SECTIVED
	A. BASIC IDENTIFICATION DATA	<u></u>
1. Enter the information requested :	about the issuer	2 20 2007
Name of Issuer ( check if this i	s an amendment and name has changed, and indic	[2] 70 (N)
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
725 Trademark Dr.	#104 Rena NV 89521	(775)852 <b>-\056</b> 9
Address of Principal Business Opera	ations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices		
	business of researching, man capable of precise and relia other sources of energy.	sufacturing, and selling ble
Type of Business Organization Corporation	☐ limited partnership, already formed	
☐ business trust	☐ limited partnership, to be formed	Other
- Vasiness it vas	<u></u>	07087095 _
Actual or Estimated Date of Incorp		Actual
Jurisdiction of Incorporation of Or	ganization: (Enter two-letter U.S. Postal Service ab CN for Canada; FN for other foreign	urisdiction)

### **GENERAL INSTRUCTIONS**

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

• Each promoter of the issuer, if the is-		•		
<ul> <li>Each beneficial owner having the pow securities of the issuer;</li> </ul>	er to vote or dispose, or	direct the vote or dispo-	sition of, 10% o	or more of a class of equity
Each executive officer and director of		corporate general and ma	anaging partners	s of partnership issuers; and
<ul> <li>Each general and managing partner of</li> </ul>	of partnership issuers.			
Check Box(es) that Apply:   Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)			· · · · · · · · · · · · · · · · · · ·	
Parsons, James		#4.1 <del>7.</del>		
	nd Street, City, State, 2			•
725 Trademark Dr.,#	104, Keno, N	11 84271	·	
Check Box(es) that Apply:   Promoter	△ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Bahan, James				
<del>-</del> - +	and Street, City, State, 2			
2493 Granite Springs		NV 89509	<u> </u>	
Check Box(es) that Apply:  Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)	,			
Barnard, J. Kichard				<u></u>
Business or Residence Address (Number a			a Dano	NII 2050 I
Barnard, Vogler & Co., 19		St. Suite 110		100 01501
Check Box(es) that Apply:   Promoter	(2) Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
webster, Ranson				
Business or Residence Address (Number	_ ^	. ()	NIV Q	a50U
Evergreen Capital LLC		<u>looto, Keno</u>		1307
Check Box(es) that Apply:	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Kahl, William	1 St Situ St.	7:- C-4:>		
	and Street, City, State,	UV 89509		
620 Meadowgate Cou		·		<b>5</b> 6 1 1/
Check Box(es) that Apply:   Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Laughton, James	and Street, City, State,	7in Code)	<u> </u>	<u> </u>
Business or Residence Address (Number The Laughton Co. Inc.,		•	IOO. Re	na NV 89503
Check Box(es) that Apply:   Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
The state of the s			<del></del>	
Full Name (Last name first, if individual) Harker Roger				
	and Street, City, State,	Zip Code)		
P.O. Box 2680	Minden, N	N 89423	•	
		tional copies of this shee	t. as necessary.	<u> </u>

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

				B. IN	FORMAT	TON ABO	OUT OFFE	RING			•		
1 1100	he issues	old or do	es the issu	er intend	to sell to :	non-accrec	lited inves	ors in this	offerine?			Yes □	No Ma
I. Has t	ine izzaei s	_					2, if filin					_	_
2 11/1	ن ماه ما	- -i isu										\$12	100
2. wnav	is the mi	mun mv	estment m	at will be	accepted 1	ion any n	ilos vilduali :	• • • • • • • • •			•••••	Yes	No
3. Does	the offeri	ng permit	joint owne	rship of a	single uni	t?							
4. Enter	the inform	nation requ	ested for e	ach person	n who has t	een or wil	l be paid or	r given, dir	ectly or inc	directly, any	y commis-		•
sion o to be list th	or similar r listed is a ne name of	emuneration n associate T the broke	on for solic d person o r or dealer	itation of part of agent of the control of the cont	purchasers a broker o than five (	in connect or dealer re 5) persons	ion with sa egistered w	les of secu ith the SE d are asso	rities in the C and/or v	offering. I with a state ons of such	f a person or states,	) ,	
Full Name	(Last nan	ne first, if	individual	)									
Business o	r Residenc	e Address	(Number	and Street	, City, Sta	te, Zip Co	xde)						
		<b>8</b>	D-1										<del></del>
Name of A	Associated	Broker or	Dealet										
	Which Per						asers						C
(Check	"All State	s" or chec	k individu	al States)			• • • • • • • • •						
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	(DE)	(DC)	[FL]	[GA]	[HI]	[ ID	•
[IL]	[ IN ]	[ IA ]	[KS]	[KY]	[LA]	(ME)	[MD]	[MA]	[MI]	[MN]	[MS] [OR]	(MO	-
[MT] [RI]	[ NE } { SC }	[NV] [SD]	[HN] [TN]	[ [ [K] ] [ TX ]	[MM] [UT]	[YY] [YT]	[NC] [VA]	[ND] [WA]	(OH) [WV]	{OK} {Wl}	[WY]	[PR	-
Business C	or Residen	ce Address	(Number	and Street	ı, City, Sta	ite, Zip Co	ode)	<del>.</del>		<u>-</u>	<del>- ;</del> -	·	
Name of	Associated	Broker of	r Dealer			<del></del>	<u>.                                    </u>	<u></u>	<del></del>	<u> </u>			
States in	Which Per	son Listed	Has Solic	ited or In	tends to So	olicit Purc	hasers						
	"All State											O All	State
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[ CT ]	[DE]	[DC]	[ FL ]	[GA]	( HI )	[ ID	
[ IL ]	[ IN ]	[ IA ]	[KS]	(KY)	(LA)	(ME)	[MD]	[MA]	[MI]	[MN]	[MS]	IMC	
[MT]	[NE]	[NV]	(NH)	(NJ)	[NM]	(NY)	[NC]	[ND]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[ PA [ PR	
[RI]	[ SC ]	[SD]	[TN]	[TX]	(UT)	[VT]	[VA]	[WA]	[₩٧]	( w 1 )			
1011114111	c (Last na		111011100	•,									
Business of	or Residen	ce Address	(Number	and Stree	t, City, Sta	ate, Zip C	ode)						
Name of	Associated	Broker o	r Dealer		; <del></del>		·			<u>-</u>	_ <del></del>		
States in	Which Per	son Listed	Has Solid	ited or In	tends to Se	olicit Purc	hasers		· · · · · · · · · · · · · · · · · · ·		<del></del>		_
	"All State						•					□ Ali	
{AL}	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[ HI ]	[ ID	
[ ]L ]	[ IN ]	[ IA ]	[ KS ]	[KY]	[LA]	[ME]	[MD]	[MA]	[ M1 ]	[MN]	[MS]	[MC	
[MT]	[NE]	[NV]	[HN]	[N]	[MM]	[NY]	[NC]	[ND]	[OH]	(OK)	[OR]	[PA	
[RI]	[NE]	[SD]	[TN]	(TX)	IUTI	[VT]	[VA]	[WA]	(WV)	[WI]	(WY)	( PR	

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box $\Box$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	<b>s</b>	\$
	Equity	\$ 2,700,000	s 2,679,400
	<b> ■</b> Common		
	Convertible Securities (including warrants)	s	s
	Partnership Interests		
	Other (Specify)		
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.	<del></del>	<del></del>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number	Aggregate Dollar Amount
		Investors	of Purchases
	Accredited Investors	39	s 2,679,400
	Non-accredited Investors	O	<u>s</u> 0
	Total (for filings under Rule 504 only)	39	5 2,679,400
	Answer also in Appendix, Column 4, if filing under ULOE.		
3	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Type of	Dollar Amount
	Type of offering	Security	Sold
	Rule 505	<del> </del>	\$
	Regulation A		\$
	Rule 504		<b>s</b>
	Total		\$
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		s
	Printing and Engraving Costs	🔁	5 1,600
	Legal Fees		s 1.300
	Accounting Fees		<b>S</b>
	Engineering Fees		<b>S</b>
	Sales Commissions (specify finders' fees separately)		s
	Other Expenses (identify) filing fees, mailing phone		\$ 1100
	Total	-	\$ 4,000

	C. OFFERING FRICE, NUMBER OF ENVESTORS, EXPENSES AN	n naf	OF PROCEE	TI-2
	b. Enter the difference between the aggregate offering price given in response to Part C tion 1 and total expenses furnished in response to Part C - Question 4.a. This difference "adjusted gross proceeds to the issuer."	e is the	!	s 2, 696, <b>9</b> 00
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or propose used for each of the purposes shown. If the amount for any purpose is not known, fur estimate and check the box to the left of the estimate. The total of the payments listed must the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b	nish an st equa	i I	
	the automorphism is the same at form in response to 1 and C - Question 4.0	auuve.	Payments to	
			Officers, Directors, &	,
			Affiliates	Others
	Salaries and fees			•
	Purchase of real estate			
	Purchase, rental or leasing and installation of machinery and equipment			
	Construction or leasing of plant buildings and facilities	🗆 1		G 5 180,000
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)			<b>s</b>
	Repayment of indebtedness		•	· /
	Working capital			
	Other (specify):	_ 0 1	i	Ø \$ 359,006
		- 🖸 !		_ 0 \$
	Column Totals			_
	Total Payments Listed (column totals added)		o s.á	2,696,000
_	D, FEDERAL SIGNATURE			
o	ne issuer has duly caused this notice to be signed by the undersigned duly authorized persollowing signature constitutes an undertaking by the issuer to furnish to the U.S. Securities test of its staff, the information furnished by the issuer to any non-accredited investor processes to the information furnished by the issuer to any non-accredited investor processes.	and Ex	change Comm	ussion, upon written re-
\$	suer (Print or Type)		Da	te   '/
	Heetronix Lichard	2	-cov	12/14/07
	arne of Signer (Print or Type) Title of Signer (Print or Type)			
_	T.RICHARD BARNARD SECRETARY TRET	0ec	Rel	

-ATTENTION-

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions  Yes No of such rule?
	See Appendix, Column 5, for state response.
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
4	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.
The und	issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the tersigned duly authorized person.
Issu	Heetronix  Signature  Lichard Darram  Date  12/1+/07

Name (Print or Type)

J. RICHARD BARNARY

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPE	NDEX *	83(#56.57 - 1 A-	aa 🔃 👢

1	1		3	4 5					
	to non-actinvestors	to sell ccredited in State Item 1)	Type of security and aggregate offering price offered in state (Part C-Item1)	Number of	Type of investor and amount purchased in State (Part C-Item 2)				fication te ULOE attach ition of granted) -Item!)
State	Yes	No		Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL		<b>\</b>							
AK			,						
AZ		/							
AR							<u></u>		
CA		<b>✓</b>	\$2,700,600 Common Stock	2_	\$72,000				
со		<u> </u>		:		<u> </u>			
СТ		<b>/</b>							
DE		· /							
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MI		1							
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мо		V							

## APPENDIX

		· · · · · · · · · · · · · · · · · · ·			CALIFORNIA	4				
1	1	2	3			5 Disqualification				
		_	Type of security		•					
	Intend to sell and aggregate									
		ccredited	offering price		Type of i	nvestor and			attach ation of	
Ì		s in State	offered in state	1		chased in State			granted)	
	(Part B	-Item 1)	(Part C-Item1)	<u>.</u>	(Part C-Item 2)				-Item 1)	
		] !		Number of	'	Number of				
State	Yes	No		Accredited Investors	Amount	Non-Accredited: Investors	Amount	Yes	No	
	165	.10		1117031013	Amount	Investors	Amount	1 23	110	
MT			4 5 704 040				<del></del>		<del> </del>	
NE			2,706,060 Common Stock	35	\$2,592,000		<del> </del>			
NV							<u> </u>			
NH			\$2,700,000 common Stock	t	\$24,000					
NJ										
NM		/								
NY										
NC		- /								
ND								<u> </u>		
ОН										
ОК		/								
OR		1.	\$2,700,000 Common stock.	l	\$12,000					
PA		/								
RI		/						ļ		
sc		<u>/</u>								
SD	<b></b>	V								
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